

State of California—Health and Welfare Agency
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address		4. Generator's Phone (714) 898-8121		5. State Manifest Document Number: 86544070	
Silicon General 11651 Monarch, Garden Grove, Ca.		92641		6. State Manifest Document Number: CAD07701283	
5. Transporter 1 Company Name		6. US EPA ID Number		7. State Transporter's ID	
Omega Recovery Services		C A D 0 1 4 2 2 4 5 0 9 1		701135	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone	
				213/698-0991	
9. Designated Facility Name and Site Address		10. US EPA ID Number		E. State Transporter's ID	
OMEGA RECOVERY SERVICES 12504 E. Whittier Blvd. Whittier, Ca. 90602				F. Transporter's Phone	
				G. State Facility's ID	
				CAD042245001	
				H. Facility's Phone	
				213/698-0991	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	
a. WASTE CORROSIVE LIQUID N.O.S. UN 1760		No. Type		Unit	
b. (Micro-Strip) Corrosive Material		1 9 2 DM		11000 P	
c.					
d.					
14. Additional Descriptions for Materials Listed Above		15. Handling Codes for Wastes Listed Above		1. Waste No.	
		01		211	
15. Special Handling Instructions and Additional Information					
**Call Customer for P.O.# when disposal cost is determined. This request was set by Ali @ Silicon General (Verbal)					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name		Signature		Month Day Year	
HIEP NGUYEN		[Signature]		01/10/1987	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		[Signature]		01/10/1987	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		[Signature]		01/10/1987	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name		Signature		Month Day Year	
FRANK FORD		[Signature]		01/10/1987	

DHS 8022 A (11/85)
EPA 8700-22

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento CA 95812

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